

Date In: 08/05/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18008425/13	SAS e-filing		
Veh No: YM7571H	E-mail (within 8 hrs, AP: 2 hrs)		
D.O.A: 07/05/18 1000	i-Motor Claim Form	MS/0993531 -	001
OD: (11) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (N-51) Tel: _____ Fax: _____

TP Particulars:	Veh No: <u>G8D3955E</u> INC () / Non-INC ()
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Owner / Driver: (_____) Tel: (_____)

Policy No: () Period: () Cover Type: ()

Confirmed by : (_____ Date: _____ Time: _____)

Insured/Driver Liability () [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

Year of Registration: () Warranty: YES () / NO ()

Excess: (\$) Loading: \$1,000 () / \$2,000 ()

() Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co. ()

Remarks:-	(INC hotline: 6788 6616)	Date & Time Completed	Done by
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1) Apply for Transport Allowance () / Courtesy Car ()		
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2) QC Check / Post Repair Inspection	()		
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3) Upload Resurvey Photo [Repair Cost > \$3000]	()		
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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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NA1802895		Invoice Preparation Checklist		1st Bill	Add Bill
Claimant's Particulars :-		1) AR : Accident Reporting	(\$30);		
		2) DA : Damage Assessment	(\$100); INC (\$80)		
Driver/Owner:		3) TF : Towing Fee	\$40/\$45		
		4) FT : Follow-Through Survey	\$120		
Contact No:		5) FT : Follow-Through Survey (Resurvey)	\$30		
		For claiming against INC Only (wef 10 Jan 2005)			
Damaged Portion:		6) TR : Re-inspection	\$75		
		7) N1 : Idac DA + SMRT Survey	\$160		
		8) NTUC Additional Services:-			
		OD:			
QC Checked by (Engr-In-Charge):		*N5: Courtesy Car / Tpt Allowance	\$5		
		*N6: Repair Co-ordination	\$10		
		*N7: Post Repair Inspection	\$25		
		*N8: DV / Collect Excess Coordination	\$5		
Auditors' Comments :-		TP (N11) : TP (N-n INC) against INC	\$20		
		9) N12: Idac Mobile	30		
		Invoice dated	Fee Charged		

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	08/05/2018 16:12
Date Of Accident	07/05/2018 10:00
Exact Location Of Accident	AYE TWDS TUAS B4 CORPORATION RD BETWEEN 15 TO 16KM
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YM7571H
Insured/Policyholder	
Name Of Registered Owner	HUK SENG TRANSPORT PTE LTD
Co Reg No	200605723C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92709470

Vehicle Particulars

Manufacturer	NISSAN
Model	UD
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5085593965-01
Cover Note Number	

Driver

Name of Driver	BENJAMIN PAARI
NRIC No	S1369470B
Date Of Birth	03/10/1959
Occupation	OUTDOOR
Date Of Driving Pass	05/05/1995
Driving Experience	23 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94220078
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 210 BOON LAY PLACE #09-85
Postcode	640210
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7449999 - FAX NO: 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180508/2048

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD3955E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number XD2014S
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number YP6576K
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number GBH2653L
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category COMMERCIAL VEHICLE
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name BENJAMIN PAARI
Approximate Age
Injuries Sustain SLIGHT
Injured person in which vehicle? YM7571H
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



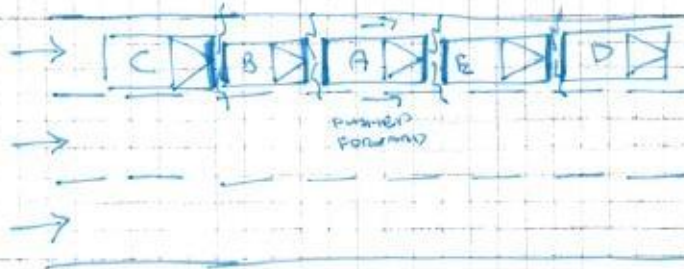
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

VEHICLE A - YM 7571H
 VEHICLE B - GBD 3955E
 VEHICLE C - XD 2014S
 VEHICLE D - MP 6576K
 VEHICLE E - GBN 2653L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG AYE TOWARDS THIS DIRECTION, I WAS ON THE EXTREME LEFT LANE.

WHILE GOING STRAIGHT AHEAD, AT SOMEWHERE BEFORE (TURNING PIER RD / JERUNG ISLAND / JUN BOON LAY) EXIT, THE VEHICLE INFRONT BRAKE TO COMPLETE STOP, AND SO I TOO APPLIED BRAKE TO COMPLETE STOP.

SUDDENLY AFTER A FEW SECONDS I FELT A GREAT IMPACT FROM THE REAR OF MY VEHICLE, AND THIS IMPACT WAS SO GREAT THAT PUSHED ME FORWARD AND HIT ONTO THE VEHICLE INFRONT.

ALIGHTED FROM MY VEHICLE AND REALIZED IT WAS A VEHICLE BEARING GBD 3955E THAT COLLIDED TO THE REAR OF MY VEHICLE, AFTER IT WAS HITTED BY A TRAILER VEHICLE (XD 2014S), AND CAUSING A IMPACT THAT PUSHED ME FORWARD AND HIT ONTO THE VEHICLE INFRONT. IT WAS A CHAIN COLLISION INVOLVING 5 VEHICLES.

VEHICLE A - YM 7571H
 VEHICLE B - GBD 3955E
 VEHICLE C - XD 2014S
 VEHICLE D - MP 6576K
 VEHICLE E - GBN 2653L

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
 Date & Time:

Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



sfym 08/05/18



SINGAPORE POLICE FORCE



T/20180508/2048

1 of 3

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

Report No. T/20180508/2048

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/05/2018 12:39	Vide Report No.:	Station Diary No.: 18
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Informant's Particulars

Name of Informant: BENJAMIN PAARI		Address: APT BLK 210 BOON LAY PLACE #09-85 SINGAPORE 640210	
ID Type / ID No.: NRIC NO / S1369470B		Contact No.:	Mobile: 94220078
Nationality: SINGAPORE CITIZEN		Home/Office:	
		Email:	
Sex: Male	Age: 58	Date of Birth: 03/10/1959	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 3,4	
		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/05/2018 10:00	Type of Location: Expressway
Location: Along Road 1 AYER RAJAH EXPRESSWAY				
Towards Tuas, before Coperation Rd between 15km to 16km				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Chain Collision			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD3955E	Lorry				Seriously Damaged	0
GBH2653L					Seriously Damaged	0
XD2014S	TRAILER				Seriously Damaged	0
YM7571H	Lorry				Seriously Damaged	0
YP6576K	Lorry				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20180508/2048

2 of 3

Police Station Of Origin:
MacPherson NPP
54 Phipps Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

Report No. T/20180508/2043

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	BENJAMIN PAARI	ID No.	S1369470B
Related Vehicle	YM7571H (Lorry)	Contact No.	94220078
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	07/05/2018	Date Discharge	07/05/2018
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On the above mentioned date and time I was travelling along AYE towards Tuas direction, I was on the extreme left lane.

While going straight ahead, somewhere before (Jurong Pier Rd/Jurong Island/Jin Boon Lay) exit the vehicle in front of me GBH2653L brake to a complete stop. As such I also applied brakes to a complete stop. Suddenly after a few seconds, I felt a great impact from the rear of my vehicle. The impact was so great that it pushed me forward and caused me to hit the vehicle in front of me.

I alighted from my vehicle and discovered that it was vehicle GBD3955E that ran into the rear of my vehicle. It ran into my vehicle because a trailer vehicle XD2014S had run into it. The impact from this collision was what caused my vehicle to run into the vehicle in front of me. It was a chain collision involving 5 vehicles.

Traffic Police attended to the scene and ambulance conveyed 3 affected drivers including myself.



**SINGAPORE
POLICE FORCE**



T/20180508/2048

3 of 3

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

Report No. T/20180508/2048

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Staff Sgt MOHAMMED FARHAN BIN
SAMSUDIN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MUHAMMAD KHAIRIL BIN KAMAL

Contact No.: 65476131

Authentication Stamp
NP168

SINGAPORE
POLICE FORCE

SIGNATURE

Signature Of Informant:

Date/Time:
08/05/2018 12:39

Classification Of Case:

Vehicle No.	5M7571 H	Model / Make	NISSAN UD
Date of Accident	07/05/18		
Time of Accident	1000	HRS	
Location of Accident	AJI TOWARDS TUNAS BEFORI (JAN BOON LAY BRUNNAN PISA RD BRUNNAN ISLAND) EXIT. (BEFORI CORPORATION RD) (NORTHEN 15-16 KM)		
Exact purpose use during accident	WORKING HOUR		
Name of Owner	HUK SENH TRANSPORT PTE LTD		
Telephone No.	H/P : 92709470	Home :	Office :
NRIC	200605723C		
Address	1 WHOLESALE CENTRE #02-18 PASIR PANJANG WHOLESALE CENTRE S(110001)		
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY		
Insurance Company	NINE		
Type of Coverage	Comprehensive	<u>Third Party</u>	Third Party / Fire / Theft
Policy No.	5085593965-01		
Name of Driver	As Above If No, BENJAMIN PAARI		
NRIC	S13646703	Any Passengers :	NIL
Date of birth	03/10/1959		
Occupation	<u>Outdoor</u> / Indoor		
Driving License Pass Date	05 MAY 1975 (CLASS 4)		
Gender	<u>Male</u> / Female		
Contact No.	H/P : 9422 0079	Home :	Office :
Address	BLK 210 BOON LAY PLACE #01-85 S(640210)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	<u>Employee</u> , If no, state		
Weather condition	Clear Raining Other		
Road Surface	Dry Wet Other		
Any Injuries	No, If Yes, Who?		
Name And Contact No.	BENJAMIN PAARI 9422 0079		
Name And Contact No.			
Police Report	No, If Yes, Where? JAWA WET MPC		
Vehicle B No.	G8D3 955E	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.	X020145	Any Passengers :	
Vehicle D No.	YP6576K	Any Passengers :	
Vehicle E no.	G8H2653L	Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	FAT / RR		
Camera Recorder	Yes / No		
Email Address			
PARTICULAR WORKSHOP	N-51 AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1369470B**
Name: **BENJAMIN PAARI**

Birth Date: **03 Oct 1959**
Issue Date: **10 Sep 2003**

000818837E



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1369470B**



Name
BENJAMIN PAARI

Race
INDIAN

Date of Birth
03-10-1959

Sex
M

Country of Birth
SINGAPORE

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	23 Aug 1991
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	05 May 1995

NP 428A



Licence No: **S1369470B**



NRIC No: **S1369470B**



Blood Group
B+

Date of issue
23-06-1997

APT BLK 210 BOON LAY PLACE #09-85
SINGAPORE 640210

NRIC No: **S1369470B** Date: **28/08/2010 (R)** No: **6630728**

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5085593965-01

Cover : Third Party

- | | |
|--|------------------------------|
| 1. Index mark and Registration Number of Vehicle | : YM7571H |
| Chassis Number | : PKC37BN00245 |
| 2. Name of Policyholder | : HUK SENG TRANSPORT PTE LTD |
| 3. Effective Date of Insurance | : 10 Nov 2017 |
| 4. Expiry Date of Insurance | : 09 Nov 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)


Agency : CAR INNS INSURANCE AGENCY (00000572091)
 Date of Issue : 07 Nov 2017 16:19 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

 Authorised Officer



 Chief Executive

Claim Handling

Accident MT/0993531

Policy No.	508583965-01	Vehicle No.	YM7571H	GST Registration No.	200605723C
Policyholder Name	HUK SENG TRANSPORT PTE LTD	Cover Type	Third Party	Policyholder NRIC	200605723C
Product Code	COMMERCIAL VEHICLE INSURAT	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	92709470	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	08/05/2018 17:55	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	07/05/2018	Time of Accident hh:mm	10:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AYE TWD5 TUA5 B4 CORPORATION RD BETWEEN 15 TO 16KM				

Benefits

Excess

Own damage Excess	0.00	Additional Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	
Third Party Excess	0.00	Outside Singapore TP Excess	

GST Registered Information

GST Registered	Yes	GST Registration Date	01/07/2006
GST Registration No.	200605723C	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 1 #02-18	Address 2	WHOLESALE CENTRE	Address 3	SINGAPORE 110001
Address 4		Address Type	Singapore address	Post Code	110001
Unit No.		Related Policy Number	5087969092-01		

O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	03/10/1959
Unnamed driver Name	BENJAMIN PAARI	Driver NRIC	S1369470B	Driving Experience	23
Register Date of Driver License	05/05/1995	Driver Age	58	Contact No.(Home)	0
Contact No.(Mobile)	94220078	Contact No.(Office)	0	Address 3	BOON LAY PLACE
Address 1	BLK 210	Address 2	BOON LAY PLACE	Post Code	640210
Address 4	SINGAPORE 640210	Address Type	Singapore address		
Unit No.	#09-85			Driver Insurer Company	
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.			

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	HUK SENG TRANSPORT PTE LTD	Insured NRIC	200605723C
Contact No.(Mobile)	92709470	Contact No.(Home)		Contact No.(Office)	63245412
Email Address	victor@hukseeng.com	O1 Vehicle Number	YM7571H	TP Vehicle Number	G8D3955E
Claim Description	YM7571H / G8D3955E ON 7 May 2018			Name of Preferred Workshop	N51
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	Date Received	08/05/2018 00:00
Date Registered	08/05/2018 18:01	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSILINDA	Workshop Repairer			

Print AK letter

Save Submit

Attachment

Accident No.	MT/0993531	Claim No.	001			
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	08/05/2018 00:00			
Path *						
Choose File	No file chosen	Category *	Confidential	Urgency *	Descr	
Choose File	No file chosen	Clear	Please Select	NO	Normal	
Choose File	No file chosen	Clear	Please Select	NO	Normal	
		Clear	Please Select	NO	Normal	

5/8/2018

Claim Handling(accident reporting Claim Task 001 OD-MX)

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	SAS	Normal	SAS 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:01	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 18:00	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:59	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:59	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:59	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:59	Photos	Normal	Photos 2018-5-8
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (B UKIT MERAH)) on 08 May 2018 17:59	Photos	Normal	Photos 2018-5-8

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Scan and uploading